

REMARKS

Applicant has carefully reviewed the Office Action dated July 5, 2002. With this amendment, claims 1 and 10 have been amended. Please cancel claim 6 without prejudice. Claims 1-5 and 7-17 remain pending.

Claims 1-7 are rejected under 35 U.S.C. §102(b) as being anticipated by Moore et al. in U.S. Patent No. 5,531,700. The Examiner asserts that Moore et al. disclose a biliary catheter including an elongate shaft and a guidewire lumen extension. Turning now to Figure 4 of Moore et al., it can be seen that a shortened guidewire lumen 50 has been added to the catheter, column 9, lines 9-11. It can also be seen in Figure 4 that the shortened guidewire lumen is arranged in parallel with the main lumen 48 of the catheter. Because of this parallel arrangement, a guidewire that is passed into the shortened guidewire lumen must bend in order to pass into the main lumen of the catheter. In contrast, amended claim 1 now recites that the guidewire lumen extension is axially aligned with the guidewire lumen. This feature, originally recited in claim 6, is desirable because it allows the guidewire to remain substantially straight when passing through the proximal guidewire port, thereby minimizing guidewire friction (please see, for example, page 11, lines 3-19 and Figure 4A). Applicant respectfully submits that the above amendment overcomes the rejection under 35 U.S.C. §102(b) and that claim 1 is now in condition for allowance. Because claims 2-5 and 7 depend from claim 1, they are allowable based on this amendment and because they add significant elements to distinguish them from the prior art.

Claims 1-7 and 10-15 are rejected under 35 U.S.C. §102(e) as being anticipated by Fitzmaurice et al. in U.S. Patent No. 6,190,358. The Examiner has asserted that Fitzmaurice et al. have disclosed Applicant's claimed invention. Applicant respectfully disagrees. Referring now to the rejection of claims 1-7, claim 1 includes the limitation that the tubular member

extends proximally from the proximal guidewire port. This structural feature is desirable because it allows the guidewire to be easily retracted and re-inserted into the guidewire lumen (page 11, lines 11-19 and claim 1). In contrast, Fitzmaurice et al. show a joint sleeve that is used to stiffen the catheter adjacent the exchange joint, column 4, lines 41-45. The sleeve, however, does not extend from the guidewire lumen and, instead, is fused to the catheter shaft at the exchange region. Thus, Fitzmaurice et al. fail to anticipate a structural limitation of Applicant's claimed invention.

Additionally, amended claim 1 also includes the limitation that the guidewire extension lumen is in fluid communication with the guidewire lumen. It can be seen in Figure 2 of Fitzmaurice et al. that the sleeve is fused to the catheter (column 4, lines 36-38). Thus, a lumen is not clearly defined by the sleeve. If a lumen were to be present it would not be in fluid communication with the guidewire lumen and, instead, would be disposed between the sleeve and the exterior of the catheter. Thus, Fitzmaurice et al. fail to disclose another structural feature of Applicant's claimed invention. Applicant respectfully submits that the above remarks and amendments overcome the rejection under 35 U.S.C. §102(e) and that claim 1 is in condition for allowance. Because claims 2-5 and 7 depend from claim 1, they are allowable based on the above and because they add significant elements to distinguish them from the prior art.

As to claims 10-17, amended claim 10 similarly includes the limitation that the guidewire extension lumen is in fluid communication with the guidewire lumen. Applicant respectfully submit that this feature is not anticipated by Fitzmaurice et al. as described above and that claim 10 is in condition for allowance. Because claims 11-17 depend from claim 10, they are allowable based on this amendment and because they add significant elements to distinguish them from the prior art.

Claims 1-17 are rejected under 35 U.S.C. §102(e) as being anticipated by Sirhan et al. in U.S. Pub. No. 2001/0029362. The Examiner asserts that Sirhan et al. disclose Applicant's claimed invention and refer to Figures 6, 16, and 21 therein. Similar to what is described above, Applicant respectfully submits that Sirhan et al. fail to disclose a tubular member extending from the proximal guidewire port (as required by claim 1) or that the guidewire lumen extension is in fluid communication with the guidewire lumen (as required by claims 1 and 10). Because Sirhan et al. fail to disclose structural limitations of Applicant's claimed invention, Applicant respectfully submits that claims 1 and 10 are in condition for allowance. Because claims 2-5 and 7-9 depend from claim 1, and because claims 11-17 depend from claim 10, they are allowable based on the above remarks and amendments, and because they add significant elements to distinguish them from the prior art.

Claims 1-7 and 10-15 are rejected under 35 U.S.C. §102(e) as being anticipated by McInnes in U.S. Patent No. 6,322,577. The Examiner asserts that McInnes discloses Applicant's claimed invention. Similar to what is described above, Applicant respectfully submits that McInnes fails to disclose a tubular member extending from the proximal guidewire port (as required by claim 1) or that the guidewire lumen extension is in fluid communication with the guidewire lumen (as required by claims 1 and 10). Because McInnes fails to disclose structural limitations of Applicant's claimed invention, Applicant respectfully submits that claims 1 and 10 are in condition for allowance. Because claims 2-5 and 7 depend from claim 1, and because claims 11-15 depend from claim 10, they are allowable based on the above remarks and amendments, and because they add significant elements to distinguish them from the prior art.

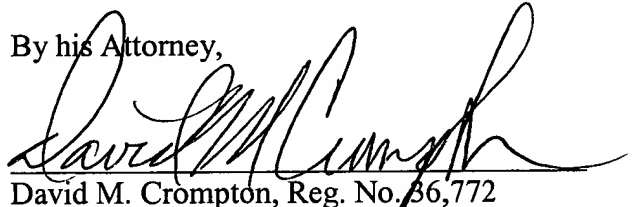
Conclusion

Reexamination and reconsideration are respectfully requested. It is respectfully submitted that all pending claims, namely claims 1-5 and 7-17, are now in condition for allowance. Issuance of a Notice of Allowance in due course is requested. If a telephone conference might be of assistance, please contact the undersigned attorney at (612) 677-9050.

Respectfully submitted,

Paul M. Scopton

By his Attorney,

A handwritten signature in black ink, appearing to read "David M. Crompton", written over a horizontal line.

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10/4/02

Version with Markings to Show Changes Made

In the Claims:

Claim 6 has been cancelled

Claims 1 and 10 have been amended as follows:

1. (Once Amended) A biliary catheter for use in combination with a guidewire and an endoscope, comprising:

an elongate shaft having a proximal end, a distal end and an injection lumen extending therethrough;

a guidewire lumen extending through a distal portion of the shaft between a proximal guidewire port and a distal guidewire port, the guidewire lumen being in fluid communication with the injection lumen of the shaft, the proximal guidewire port disposed proximal of the distal end of the shaft and distal of the proximal end of the shaft, the distal guidewire port disposed at the distal end of the shaft; [and]

a tubular member connected to the shaft, the tubular member extending proximally from the proximal guidewire port to a proximal end disposed distal of the proximal end of the shaft, the tubular member defining a guidewire lumen extension in fluid communication with the guidewire lumen and adapted to permit the guidewire to be retracted from guidewire lumen and re-inserted therein; and

wherein the guidewire lumen extension is axially aligned with the guidewire lumen.

10. (Once Amended) A single operator exchange biliary balloon catheter for use in combination with a guidewire and an endoscope, comprising:

an elongate shaft having a proximal end, a distal end, an injection lumen and an inflation lumen extending therethrough;

an inflatable balloon disposed adjacent the distal end of the shaft in fluid communication with the inflation lumen;

a guidewire lumen extending through a distal portion of the shaft between a proximal guidewire port and a distal guidewire port, the guidewire lumen being in fluid communication with the injection lumen of the shaft, the proximal guidewire port disposed proximal of the distal end of the shaft and distal of the proximal end of the shaft, the distal guidewire port disposed at the distal end of the shaft; and

a tubular member disposed about the shaft, the tubular member having a proximal end disposed distal of the proximal end of the shaft, and a distal end disposed distal of the proximal guidewire port, the tubular member defining a guidewire lumen extension in fluid communication with the guidewire lumen and adapted to permit the guidewire to be retracted from guidewire lumen and re-inserted therein.